

FILED  
May 05, 2003 8:00 am  
Secretary of State

05-05-2003 90353 030 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000038276

1. Entity Name  
**SMART AD ETC..., INC.**



Principal Place of Business  
601 BRICKELL KEY DRIVE  
SUITE 705  
MIAMI, FL 33131

Mailing Address  
601 BRICKELL KEY DRIVE  
SUITE 705  
MIAMI, FL 33131

11036871



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**1000 Brickell Ave**  
Suite, Apt. #, etc. **900**

3. Mailing Address  
**1000 Brickell Ave**  
Suite, Apt. #, etc. **900**

City & State **Miami, FL**

City & State **Miami, FL**

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip **33131**

Country **US**

Zip **33131**

Country **US**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

DE LA PENA & BAJANDAS, LLP  
601 BRICKELL KEY DRIVE  
SUITE 705  
MIAMI, FL 33131

**7. Name and Address of New Registered Agent**

Name **Ricardo Bajandas, P.A.**

Street Address (P.O. Box Number is Not Acceptable)

**1000 Brickell Ave, suite 900**

City **Miami, FL**

FL Zip Code **33131**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**Ricardo Bajandas**

**04/30/03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
**Ricardo Bajandas**  
**1000 Brickell Ave, suite 900**  
**Miami, FL 33131**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Ricardo Bajandas, see. 04/30/03 305**  
**377-0809**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)